

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

MW-24

| 1 LOCATION OF WATER WELL: | | Fraction | Section Number | Township Number | Range Number | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|------------------------------|---|----------------------------|-----------------|--------------|---------------|-----------------------|----------------|--------------------------|--------------------------|--------------------|-----------------------|------------------------------|--------------------------|-----------------|------------------------|------------------|-----------------|------------|-------------------------|--|-------------|-------------------|-----------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|
| County: Sedgwick | | SW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$ | 33 | 27 | 1E | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Distance and direction from nearest town or city street address of well if located within city? 2160 S Broadway, Wichita, KS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 WATER WELL OWNER: Discount Cigarettes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RR#, St. Address, Box # 2160 S Broadway | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City, State, ZIP Code : Wichita, KS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Board of Agriculture, Division of Water Resources Application Number: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF WELL 26 ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div style="text-align: center;"> </div> | | WELL'S STATIC WATER LEVEL 19 ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | WELL WAS USED AS: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Was a chemical/bacteriological sample submitted to Department? Yes ____ No ____ If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes ____ No ____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 TYPE OF BLANK CASING USED: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) ② PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Blank casing diameter 1 in. Was casing pulled? Yes <input checked="" type="checkbox"/> No ____ If yes, how much 3 feet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Casing height above or below land surface ____ in. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout ③ Bentonite 4 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Grout Plug Intervals From ____ ft. to ____ ft. From ____ ft. to ____ ft. From ____ ft. to ____ ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Direction from well? ____ How many feet? ____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 8/31/11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 9/8/11 This Water Well Record was completed on (mo/day/yr) 9/8/11 under the business name of Bluestem Environmental Engineering, Inc. by (signature) <i>Nick Delt</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-298-3585. Send one to Water Well Owner and retain one for your records. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |